

8206-11

POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT		REGION 6	SITE NUMBER (to be assigned by HQ) TX9067
NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.			
GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.			
I. SITE IDENTIFICATION			
A. SITE NAME TECCOR ELECTRONICS, INC.		B. STREET (or other identifier) 1101 Pamela Dr.	
C. CITY Euless	D. STATE TX	E. ZIP CODE 76039	F. COUNTY NAME Tarrant
G. OWNER/OPERATOR (if known)			
1. NAME Mr. Carl H. Prokesh, Vice-President & General Manager Mr. Don Cox, Manager, Facilities/Semiconductor Division		2. TELEPHONE NUMBER (214) 267-2601 (214) 252-7651	
H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
I. SITE DESCRIPTION See Attachment A			
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.) SF Notifier (TX S 1343)			K. DATE IDENTIFIED (mo., day, & yr.) 6/9/81
L. PRINCIPAL STATE CONTACT			
1. NAME Mr. Don Eubank, TDWR, Duncanville, TX		2. TELEPHONE NUMBER (214) 298-6171	
II. PRELIMINARY ASSESSMENT (complete this section last)			
A. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input checked="" type="checkbox"/> 4. NONE <input type="checkbox"/> 5. UNKNOWN			
B. RECOMMENDATION <input checked="" type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: _____ b. WILL BE PERFORMED BY: _____ <input type="checkbox"/> 3. SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: _____ b. WILL BE PERFORMED BY: _____ <input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)			
SUPERFUND FILE NOV 25 1992 REORGANIZED			
C. PREPARER INFORMATION			
1. NAME Hilol K. Ray, FIT		2. TELEPHONE NUMBER (214) 742-4521	3. DATE (mo., day, & yr.) 7/15/82
III. SITE INFORMATION			
A. SITE STATUS <input checked="" type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.) <input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.) <input type="checkbox"/> 3. OTHER (specify): _____ (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)			
B. IS GENERATOR ON SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify generator's four-digit SIC Code): 3622, 3643			
C. AREA OF SITE (in acres) 1 1/2 total, (approx. 100 sq. ft. for 2 tanks)		D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES 1. LATITUDE (deg.-min.-sec.) 32° 44' 33" N 2. LONGITUDE (deg.-min.-sec.) 97° 06' 30" W	
E. ARE THERE BUILDINGS ON THE SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify): Office building, workshop			

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 REVIEWED BY (GREEN) **APG** DATE **8-3-82**